



**ServSafe Food Services Sanitation Certification Program
For the Food Services Industry Presented by:
Bay County Health Department**

This course is being offered to all persons in the Food Service Industry. The course is 8-hour ServSafe Essentials course. The ServSafe Course meets the Michigan Department of Agriculture and Local Public Health Departments rules as described in the Michigan food Law of 2000 for demonstration of knowledge within a food service establishment. The ServSafe course provides training in basic sanitation principles: Food Microbiology, Prevention of Food-borne Illness, Safe Food Handling, Personal Hygiene, Construction and Maintenance of Food Service Facilities, Pest Control, and HACCP Principles.

Upon successful completion of the ServSafe Exam, you will be awarded the ServSafe Certification as a ServSafe Food Protection Manager, which is accredited by the American National Standards Institute and the Conference for Food Protection. Certificate expires in five (5) years.

THE INSTRUCTOR:

Daniel Dicks is a Registered Sanitarian with the Bay County Health Department. He has a BS from Ferris State University and a MSA Degree from Central Michigan University, also over 40 years experience in Environmental Health.

THOSE WHO SHOULD ATTEND:

Owners, operators, and food service personnel, food service employees including caterers and vendors, salesmen in food service, dieticians and dietary personnel, temporary food vendors, STFU vendors, as well as hospitals, schools, daycares and foster home care workers, also prospective food services owners.

FEES:

Not-For-Profit	\$125.00 (includes book)
For-Profit	\$165.00 (includes book)

HOW TO ENROLL:

Complete registration form, payment is cash or check (payable to Bay County Health Department)

Bring payment and registration form to:

**Bay County Health Department
Environmental Health
1200 Washington Avenue
Bay City, MI 48708**

For questions call (989) 895-4006 #3

SERVSAFE REGISTRATION FORM

NAME: _____ **TITLE:** _____

COMPANY NAME: _____

ADDRESS: _____ **CITY:** _____ **ZIP CODE:** _____

CONTACT PHONE NUMBER: _____

For office use only:

Date received: _____ Check: _____ Cash: _____ Receipt #: _____

Class Date: _____ Initials: _____

